DOCUMENT RESUME

ED 315 185 PS 018 581

AUTHOR Slot, N. Wim; Jagers, Hans D.
TITLE Kursushuis: The Achievement Place Model in the Netherlands. Draft.
INSTITUTION Vrije Univ., Amsterdam (Netherlands). Paedologisch Inst.
PUB DATE 30 Jan 90
NOTE 28p.
PUB TYPE Reports - Evaluative/Feasibility (142)

EDRS PRICE MF01/PC02 Plus Postage.
DESCRIPTORS Antisocial Behavior; Community Involvement; Comparative Analysis; *Delinquent Rehabilitation; Developmental Programs; Federal Programs; Foreign Countries; *Home Programs; *Institutionalized Persons; *Interpersonal Competence; Interpersonal Relationship; *Program Effectiveness; Program Evaluation; *Residential Care
IDENTIFIERS Achievement Place; *Netherlands; Program Characteristics

ABSTRACT

Since 1981, five Kursushuis ("course house") programs for delinquent youth have been established in the Netherlands. Although similar in many ways to Achievement Place (AP) programs, Kursushuis programs differ from AP programs in that they place fewer children in a course house and use a social competence model that allows task-specific definition of skills and linkage to developmental tasks. In a study of Kursushuis outcomes, pre- and post-treatment data on 58 male Kursushuis graduates and 57 youths at a state correctional institute were compared. Average pre-treatment age was 16.6 years. Youth Evaluation List (YEL) scores were obtained during admission and 6 months after graduation. The YEL focuses on three factors in antisocial behavior and social competence: problems; abilities for relationships outside the family; and abilities for community participation. At the follow-up, former Kursushuis youth showed less delinquency and significant improvement in many aspects of social competence in comparison to the pre-treatment period. Treatment trajectories for the two types of programs differed considerably. The average stay of course house youth was less than half that of institutionalized youth. Kursushuis graduates were more able to live independently than youth in the state institute. Treatment of Kursushuis youth cost much less. It is concluded that findings enhance the reputation of the AP model in the Netherlands. (RH)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED315185

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
X This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy.

Paedologisch Instituut

Postbus 303, 1115 ZG Duivendrecht

Teletoon (020) 98 21 31

KURSUSHUIS: THE ACHIEVEMENT PLACE MODEL IN THE NETHERLANDS

N. Wim Slot and Hans D. Jagers
Paedologisch instituut
Vrije Universiteit at Amsterdam

DRAFT: january 30, 1990

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY
N. W. Slot

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

Acknowledgements:

Support for the research was provided by the Department of Justice, the Department of Welfare, and the Nederlands Comité Kinderpostzegels

Running Head: KURSUSHUIS

PS 018581

BEST COPY AVAILABLE

SUMMARY

Kursushuis: The Achievement Place Model in the Netherlands

Since 1981, five Kursushuis-programs have been set up in the Netherlands. A follow-up study with regard to 58 former Kursushuis residents has been carried out. At follow-up, six months after their stay in the program, former Kursushuis youths show significant improvement in many aspects of social competence and less delinquency compared to the pre-treatment period. A comparison with an State institute which provided extensive treatment and vocational training shows comparable results in terms of progress in social competence and decrease of offending. However the treatment trajectories in both programs differ considerably: the average stay of a Kursushuis youth is 9.3 months compared to 19.1 months in the institute. After leaving the program more Kursushuis-youths than State institute residents appear to be able to live independently. The treatment costs in a State Institute appear to be four times higher compared to the Kursushuis. Further research is recommended with regard to the relation between social competence and antisocial behavior. Another recomendation concerns the use of delinquency measures in evaluation research: in contrast to static conceptualizations, delinquency should be approached from a developmental viewpoint.

1 NEW DEVELOPMENTS IN THE DUTCH RESIDENTIAL YOUTH CARE SYSTEM

The number of youths living in Dutch rehabilitation settings is approximately 30,000. About 10,000 of them show antisocial behavior. During the last three decades antisocial behavior among Dutch youths has been increasing. In the last three years youth crime figures seem to have stabilized. While antisocial behavior has for a long time been increasing, there has been a dramatic decrease in the number of residential treatment facilities. These diverging trends gave rise to the development of alternative approaches in the treatment of juvenile antisocial behavior. One approach was to expand outpatient facilities. Another was to develop community based programs.

At the Paedologisch Instituut in Amsterdam a number of outpatient- as well as residential treatmentprograms has been set up and evaluated. These programs were based on the so called Behavior Deficiency Model (Slot & Bartels, 1983) which states that delinquent behavior results from a lack of social skills. Recently (Slot, 1988) this model has been specified and transformed into the Social Competence Model.

2 ANTISOCIAL BEHAVIOR AND SOCIAL COMPETENCE

Antisocial behavior includes conduct disorders as described in the DSM-III (APA, 1987) and/or frequent offenses. Our conceptualization of social competence has been influenced by the work of McFall (1982) and McFall & Dodge (1982). After summarizing the criticisms concerning the concept of social skills, these authors call for a distinction between tasks and skills. Social competence -according to McFall & Dodge- refers to an adequate application of a skill, given a specific task. We define social competence as the degree to which a persons' response to tasks resulting from everyday social interaction is rated as being adequate. Social competence can be considered as a balance between skill and task.

There is a substantial evidence in the literature that a lack of social skills is related to antisocial behavior in -

youths. (Freedman, Rosenthal, Donahoe, Schlundt & McFall, 1978; McFall & Dodge, 1982; Dishion, Loeber, Stouthamer-Loeber & Patterson, 1984; Gable, 1986). Furthermore, the main characteristic of effective treatment of juvenile antisocial behavior is a focus on the teaching of skills that - according to Bartollas (1985) - "...prepare them for adjustment in the community. These range from educational and vocational to interpersonal and problem solving skills".

With regard to tasks, the literature indicates a relation between antisocial behavior and unfavorable circumstances such as: living in a bad neighborhood, psychiatric problems and/or antisocial behavior in parents or family members, broken homes, economic problems in the family. (Rutter & Giller, 1983; Loeber & Dishion, 1987). Dutch research on the correlates of juvenile antisocial behavior shows the same results (Junger-Tas, Junger, Barendse-Hoornweg & Sampiemon, 1983).

Treatmentprograms based on the social competence model should not be confined to skills-training. Tasks may also serve as treatment targets. Task alleviation can be achieved through stimulus control, self control and interventions in the environment of the youth. In the case a youth avoids a (developmental) task[1] a stepwise exposure to the task is necessary, together with skills-training.

When faced with a request for founding and evaluating community-based treatment programs in the Netherlands, researchers of the Paedologisch Instituut decided to adapt the Achievement Place- or Teaching Family Model. Achievement Place seemed to be a program with excellent possibilities for maximizing treatment effects through skills training as well as task-management.

---

[1] cf Baltes, Reese & Lipsitt (1980) "Developmental tasks have to be solved by a person to enable his optimal adaptation at a later point in his lifetime"

3 THE ACHIEVEMENT PLACE- OR TEACHING FAMILY MODEL

The Achievement Place- or Teaching Family Model may be discussed briefly, since it has been extensively described elsewhere. (Phillips, Phillips, Fixsen & Wolf, 1974; Blase, Fixsen & Phillips, 1984; Braukmann & Wolf, 1987).

An Achievement Place program is located in an ordinary family house in a local community. Two teaching parents, mostly a married couple, share their daily life with 8 youths. Some teaching parents have children of their own who participate in the daily life in the program. An alternate assists the teaching parents and works when the teaching parents are off-duty or on leave. A consultant supervises the teaching parents and the alternate.

The program is community-based: the youths come from the local neighborhood. They attend schools, clubs and recreation facilities in the community. The program includes three main components: 1) the motivation system: a series of token systems through which a youth proceeds, 2) teaching, the use of training techniques based on verbal instruction and modeling and 3) "semi-selfgovernment", responsibility for the youths in planning the program.

Until now there have been more than 200 Achievement Place programs. A first attempt to replicate Achievement Place failed because of inadequate use of teaching techniques and an overemphasis on token reinforcement. In recent years programs for girls and co-ed programs have been established. The program has been adapted for mentally retarded (Sherman, Sheldon, Morris, Strouse & Reese, 1984) and autistic youths (Mc Clannahan, Krantz, McGee & McDuff, 1984). Process research in 14 programs showed a negative correlation between the amount of teaching and the number of offenses a youth committed during his stay in the program. (Bedlington, Solnick, Braukmann, Kirigin & Wolf, 1979). In another study the variables "verbal contact between teaching parent and youths" and "youth's proximity to teaching parent" were identified as co-variates of a low delinquency level. (Solnick, Braukmann, Bedlington, Kirigin & Wolf, 1981). Evaluation studies of the Achievement Place program show a lower

delinquency level for Achievement Place-youths compared to their controls during their stay in the program. After a longer follow-up period however the differences in favor of the program disappear. (Kirigin, Wolf, Braukmann, Fixsen & Phillips, 1979; Kirigin, Braukmann, Atwater & Wolf, 1982). Consumer evaluation showed that the programs were less expenssive than the control programs and were rated far more positively by the youths (Weinrott, Jones & Howard, 1982). A nation-wide evaluation of Achievement Place showed positive during-treatment effects. However these effects were related to non-status offenses and did not differ from the effects obtained in control-programs. (Jones, Weinrott & Howard, 1981). Braukmann & Wolf (1987) suggest that the results of the Jones' study might have been biased by selection of the control groups, and the fact that a number of Achievement Place homes participating in the study had a poor program quality, due to the absence of booster training and evaluation. [2]

Another study, including all Achievement Place programs in the state of Kansas involved 168 youths. The results confirmed earlier studies: there was evidence for during-treatment effects, but the study failed to show long term effects. (Braukmann & Wolf, ibid).

4 FROM ACHIEVEMENT PLACE TO KURSUSHUIS[3]

The Dutch Kursushuis-program resembles Achievement Place to a high degree. The number of staffmembers, the teaching techniques and the motivation system are the same. The most important difference is number of youths living in a Kursushuis: six instead of the usual number of eight in an Achievement Place program. Yule and Brown (1987) observed a "remarkable similarity" between Achievement Place and the Kursushuis-program they visited. At the same time they

---

[2] According to the authors these problems were solved through the advent of the National Teaching-Family Association, which provides training and quality-control.

[3] The name Kursushuis is made out of two Dutch words: "kursus"means course or class, "huis" means house or home.

mention that the Kursushuis-programs "seem somewhat more individualized than those initially present in the Kansas prototype..." (ibid, page393). This individual approach stems from the social competence model, which allows for making a task-specific definition of skills. During the first four to six weeks after his enrolment into the program a youth learns skills which are more or less standard for every freshman. These include: household skills, hygiene, the following of basic rules and listening to feedback. After this period, the teaching goals will be described on a more individual level. According to the social competence model: the treatment goals are defined in terms of tasks and corresponding task-appropriate skills.

This approach allows for making a link with developmental tasks.[4] Frequently a youth's response to the program -be it progress or stand-still- is discussed in terms of his or her developmental course. This analysis often results in new teaching goals and new rationales for these goals. Especially for the more advanced youths, rationales which refer to progress in development prove to be powerful.

4.2. Implementation

Until now [5] six Kursushuis-programs have been established and two additional programs are being set up. Most programs are co-ed. The realization of Kursushuis-programs in the Netherlands has proved to be very difficult. Major problems are housing and governmental regulations. Serious housing problems in the Netherlands make finding a suitable residence very difficult. For the most recent programs, the only option was a purpose-built home. Governmental regulations are

---

[4] Main developmental tasks for adolescents are: biological changes requiring new concepts about the body and new concepts and skills with regard to sexuality; changes in cognitive functioning influencing the way a youth understands the world, society, and moral issues; changes in social roles especially in interaction with parents and peers; changing expectations with respect to an occupation. (cf Hindley, 1983)

[5] Spring 1990

numerous, especially those with regard to the working hours and salary of staff members. A step-wise salary raise, corresponding with certain levels of certification, a procedure which is used for programs participating in NAFTA (cf footnote 2), would be illegal in Holland. Another problem is a job immobility among Dutch youth-care staff members. Due to unemployment, staff members nowadays stay in their jobs for a longer period of time. This causes a low supply of jobs. When both partners who are considering to become teaching parents have steady jobs, they are often hesitant to change to a profession which may only last for two or three years. A further problem is the strict regulation of residential treatment capacity in the Netherlands. New programs can only be started when some existing program is being closed down.

In Germany where youth care regulations can be compared with the Dutch regulations, the establishment of Achievement Place failed because of similar problems (Bönner, et al 1980). It should be noted, however, that the German Achievement Place model differed considerably from the original model.

The above-mentioned problems explain the low pace of program implementation. Nevertheless, the Kursushuis-program is increasingly recognized as a viable alternative. The Kursushuis project-team at the Paedologisch Institute was awarded with a price for innovation in the field of residential youth care.

5. Outcome-effects

5.1. Design of the study

Since antisocial behavior in girls differs substantially from antisocial behavior in boys (Robins, 1986; Rutter & Giller, 1983) this study has been confined to boys. Pre- and post treatment data were examined for 58 boys who graduated from a Kursushuis-program. The results will be compared with data of 57 boys who had been assigned to a state correctional institute.

5.2. Subjects

Kursushuis-youths

The average pre-treatment age was 16.6 years, (σ = 1.02). 52 Out of 58 had been placed by the juvenile judge. Every youth placed by the judge is being supervised by a social worker. This supervision continues during residential treatment. The average age at follow-up was 18.1 years (σ = 1.16).

5.3. Measures

Youth Evaluation List (YEL)-scores were obtained during admission and six months after graduation from the program.

The YEL comprises several dimensions of antisocial behavior and social competence. All items focus on concrete observable behavior. A reliability test on an earlier version of the YEL showed an inter-judge reliability of .91 (Bartels, 1986). Factor analysis on YEL-scores of 100 antisocial boys produced three dimensions (Jagers & Vlaar, 1984). These dimensions will serve as a format in presenting the results of this study.
The three dimensions are the following:

1) PROBLEMS

This dimension includes: daily life overall functioning (DOF); overall functioning within the family (FOF); relations with parents (RP); offenses (OFF); academic and vocational aspirations (AVA), social skills (SOC); and specific problems at home (SPH).

2) ABILITIES FOR RELATIONSHIPS OUTSIDE THE FAMILY

Including: number of months a youth had a girlfriend during the last six months (MREL) and SOC.

3) ABILITIES FOR COMMUNITY-PARTICIPATION

Including: drinking (DRINK); number of months a youth had a job or was visiting school during the last six months (MJOS) and AVA.

5.4. RESULTS

5.4.1. Pre-treatment and Follow-up Differences

Paired comparisons with two-tailed t-tests of significance were performed on pre-treatment and follow-up YEL-scores. The results are presented in Table 1.

- Please insert Table 1 here -

On all YEL variables making up the "Problem-factor" the Kursushuis youths show improvement. There is a significant improvement on daily overall functioning; more social skills, less specific problems at home and a significant improvement in overall functioning within the family and better relationships with their parents. The average number of offenses diminished: from 3.42 during the six months before enrollment, to 1.44 in the six month period between graduation and follow-up.

The academic and vocational aspirations improve only slightly; the change is not statistically significant.

With regard to the YEL variables making up the factor "Abililties for relationships outside the Family" the Kursushuis youths show a clear improvement. They are more socially competent and have more and longer lasting relationships with girl friends.

With regard to the YEL variables which make up the factor "Abilities for community participation" the results are less clear. The youths show somewhat more realistic academic and vocational aspirations. However there is no significant

increase in the average number of months the youths went to school or work. During the six month-follow-up period, 27 percent of the boys did not attend school or work at all, 34 percent attended school or work for some time (average 2.75 months) and 38 percent attended school or went to work during the entire period.

Compared to the pre treatment period, the alcohol consumption of Kursushuis-youths increased. The percentage of non drinkers decreased from 60% at pre-treatment to 18% at follow-up. During the follow-up period most of the youths (65%) had less than 20 drinks per week, a commonly used limit for social drinking in the Netherlands. The number of excessive drinkers increased from 2% at pre-treatment to 18% at follow-up. An increase in drinking during adolescence is common in the Netherlands.

A further analysis of the offending patterns before and after treatment, showed the following results.

During the pre-treatment period 34 percent of the youths did not commit any offenses[6], 28 percent committed one or two offenses and 38 percent committed more than two offenses.

- Please insert Table 2 here -

During the follow-up period the majority of the youths did not commit any offenses (66%), 22% committed one or two offenses and 12% committed more than two offenses.

Le Blanc and Fréchette (1989) stress the importance of an analysis of the process of offending. They make a distinction between: stability, progression to a more serious level of offending and regression to a less serious level. Le Blanc and Fréchette (ibid, page 122) analyzed the offending process in a delinquent sample (N=470) during a two year period. It appeared that 48% kept to crimes of the same level of

---

[6] A distinction between status and non status offenses is unknown in the Netherlands. In this study the variable "offenses" includes the following delinquent acts: theft, burglary, (sexual) assault, manslaughter, use of hard drugs, vandalism, possession of weapons.

gravity, 20% had regressed and 24% had progressed.[7]

Table 2, showing a breakdown of pre-treatment and follow up offence figures permits a similar analysis[8] for Kursushuis-youths. The figures differ dramatically: from the 38 youths who were delinquent during pre-treatment 8 (24%) kept to the same level of gravity, 24 (73%) regressed, and 1 (3%) progressed. It should be noted that these figures encompass a shorter period: 15 to 17 months.

When we look at the whole sample of 50 youths, including those who were not delinquent during pre-treatment, we see 13 (26%) who stayed nondelinquent, 8 (16%) who kept to the same level of gravity, 24 (48%) who regressed to a less serious stage of offending and 5 (10%) who progressed.

5.4.2. A State Institute as a reference

During the first three years of the Kursushuis-project YEL-scores were collected on all youths who entered a State Institute. Pre-treatment and follow-up data were collected of 57 youths, all boys.

The state institute youths cannot be considered as a control group since the institute provided extensive treatment and vocational training. Moreover, random assignment had not taken place. The comparison between the Kursushuis-program and the State Institute is not an effect study in the classical sense. It's purpose is a cost and benefit analysis. Considering the fact that a State Institute would be the alternative for a large number of Kursushuis-youths had there been no kursushuis-program, a comparison appears to be reasonable.

---

[7] Le Blanc & Fréchette do not explain what happened to the missing 8%

[8] It should be noted that Le Blanc and Fréchette differentiate between different sorts of offending, while table 2 refers to different numbers of offenses. However, our own research (Jagers & Vlaar, 1984) shows a high correlation (.88) between the variety of offenses and the number of offenses committed. Therefore, a comparison of figures showing progression or regression in the number of offenses, with progression or regression in terms of sorts of offending, seems acceptabel.

Comparison of effects

In figure 1 the effects of the Kursushuis-program are contrasted with those of the State Institute.

- Please insert Figure 1 here -

The graphs represent the difference between the average pre-treatment and the average follow-up score on the three main dimensions of the YEL: Problems, Abilities for relationships outside the family, and Abilities for community-participation.

Effects of the Kursushuis-program and State Institute are practically similar for the first two dimensions. It should be noted that no differences were found between both programs on pre-treatment scores on variables which make up these factors.

On the third dimension we see a notable difference. In contrast to the State Institute, the Kursushuis-program shows a zero treatment effect on "Abilities for Community Participation". Further analysis shows that at offset both programs differed significantly on this dimension, the Kursushuis-youths being more able to participate in the society. Although the Kursushuis-youths show some progress on MJOS (the number of months a youth had a job or was visiting school during the follow-up period) as well as on AVA (academic and vocational aspirations), these effects are annihilated by an increase of alcohol consumption.

Comparison of treatment-trajectories

From the data it appears that the treatment trajectories of kursushuis-youths and State Institute-youths differ considerably. One remarkable difference is the average length of stay in both programs: 9.3 months (σ 4.3) in the Kursushuis-program compared to 19.1 months (σ 7.8) in the institute.

- Please insert Table 3 here -

Another difference concerns the whereabouts of the youths after leaving the program. Table 3 shows that 48.3% of the Kursushuis-youths live independently, or live with friends or relatives, compared to 26.3% of the State Institute-youths.

Comparison of costs

One day in a Kursushuis-program costs 190 Dutch guilders which equals approximately $ 90.- One day in a State Institute costs 410 guilders or $ 190. Taking into account the length of stay, one treatment in a Kursushuis-program costs about $ 25,458 compared to $ 110,382 in the State Institute.

6. CONSUMER EVALUATION

Consumer evaluation by youths

Every eight months a Kursushuis-program is evaluated. As a part of this evaluation each youth is interviewed. During the interview the youth completes a questionnaire which focuses on the following dimensions of the program:

- Fairness of the Teaching Parents
- Teaching Parents' concern
- Clarity of rules
- Social climate
- Planning for the future
- Meaningfullness of the Program

It appears that scores on fairness, concern, clarity of rules and meaningfullness of the program show little variation througout all evaluations. Most of the youths give positive rankings. The scores on "social climate", however, tend to vary considerably. Usually low scores on "social climate" are indicative for poor program quality. Scores on "planning for the future" also vary to a large degree. This is logical:

for freshmen short-term treatment goals are emphasized.

Consumer-evaluation by parents

Recently a start has been made with evaluation by parents (Beumer, 1989). Five Kursushuis-programs were involved in the study. 21 Parents received a 11 item long questionnaire focusing on four area's:

- social climate
- cooperation with teaching parents
- program clarity
- behavior of the youth

18 parents responded.

- Please insert Table 4 here -

Table 4 shows that the majority of the parents give positive and very positive ratings on "social climate". With regard to "cooperation" and "behavior of the youth" the picture is less favorable. 55% Of the parents demonstrate clear knowledge about the program.

These results leave much room for interpretation. The response rate of 86% suggests a serious involvement by parents. The positive scores on "social climate" and "cooperation" indicate that much parents approve of the program. As for the youths behavior it is not clear whether this variable really represents consumer satisfaction.[9]

The fact that 55% of the parents show clear knowledge of the program can be considered as a positive result but on the other hand it should cause serious concern that 26% of the parents are unfamiliar with the program.

---

[9]Items on the youths behavior had been included so that parents could express their concern with their childs functioning. Leaving out this dimension was believed to cause the parents doubt about the value of consumer evaluation.

7. CONCLUSIONS AND DISCUSSION

At follow-up, six months after their stay in the program, former Kursushuis youths show significant improvement in many domains of social competence compared to the pre-treatment period. These youths also show less delinquency at follow-up. The offending process of the Kursushuis youths who were delinquent at pretreatment differs remarkably from the offending process in a non treatment sample of delinquents in the Le Blanc & Fréchette study. The percentage of Kursushuis youths who stop offending or regress to a less serious level of offending is far more favorable.

A comparison with a State institute shows comparable results in terms of progress in social competence and decrease of offending. However the treatment trajectories in both programs differ considerably: the average stay in a Kursushuis is 9.3 months compared to 19.1 months in the institute. After leaving the program more Kursushuis-youths than State institute residents appear to be able to live independently.

Consumer evaluation shows a great involvement by parents. Cooperation with the teaching parents and the social climate in the program are being appreciated by the parents.

These results are encouraging and enhance the reputation of the Achievement Place model in the Netherlands. At the moment an adaptation of the model is being prepared for the treatment of pre-lingual deaf adolescents with antisocial behavior.

Further research will be needed in order to clarify the effects of the program. Until now the program has been evaluated in terms of social competence and delinquency. The concept of social competence needs to be specified, especially when it comes to the relation between social competence and antisocial behavior. The concept of delinquency is not as clear cut as it appears. Delinquency among boys differs qualitatively as well as quantitatively from female delinquency. Since the number of Kursushuis-girls is growing, new evaluation methods are needed focusing on delinquency and

competence in girls. Another problem is the static nature of the conventional delinquency measures. The concept of delinquency needs to be approached from a developmental point of view. This approach should focus on patterns and stages of offending in relationship with developmental patterns among adolescent girls and boys. The work of Loeber (1988) and Le Blanc & Fréchette (1989) may provide a framework for such an approach.

REFERENCES

American Psychiatric Association. (1987). Diagnostic and statistical manual of mental disorders. (3e ed.-Revised.). Washington, DC: APA.

Baltes, P.B., H.W. Reese & L.P. Lipsitt. (1980). Life-span Developmental Psychology. Annual Review of Psychology. Vol. 31, 65-110.

Bartels, A.A.J. (1986). Sociale-vaardigheidstraining voor probleemjongeren. Lisse: Swets & Zeitlinger.

Bartollas, C. (1985). Juvenile Delinquency. New York: John Wiley.

Bedlington, M.M., J.V. Solnick, C.J. Braukmann, K.A. Kirigin & M.M. Wolf. (1979). The correlation between some parenting behaviors, delinquency and youth satisfaction in Teaching Family group homes. Paper presented at the Eighty-seventh Annual Convention of the American Psychological Association. New York, 1979.

Beumer, M.H. (1989) Een consumenten-evaluatie binnen de jeugdhulpverlening. Scriptie doctoraal examen orthopedagogiek. Utrecht: Rijks Universiteit.

Blase, K., D.L. Fixsen & E.L. Phillips. (1984). Residential Treatment for Troubled Children: Developing Service Delivery Systems. in: C. Paine, G.T. Bellamy & B.Wilcox (Eds.) Human services that work. Baltimore: Brookes.

Bönner, D.H., Distel, A., Dorfler, C.H., Fruhauf, T., Jaroszek, S., Jager, R., Knabe, C., Muschik, A., Rehbein, K., & H.J. Schultz (1980). Lernwohngruppen-Prgramm Handbuch. Marburg: Phillips Universität.

Braukmann, C.J. & M.M. Wolf (1987). Behaviorally Based Group Homes for Juvenile Offenders. In: E.K. Morris & C.J. Braukmann (Eds.). Behavioral Approaches to Crime and Delinquency. New York: Plenum Press.

Dishion, T.J., R. Loeber, M. Stouthamer-Loeber & G.R.Patterson. Skill Deficits and Male Adolescent Delinquency. Journal of Abnormal Child Psychology. Vol.12, No. 1, 37-54.

Freedman, B.J., L. Rosenthal, C.P. Donahoe, D.G. Schlundt & R.M. McFall. (1978). A Social-Behavioral Analysis of Skill Deficits in Delinquent an Nondelinquent Adolescent Boys. Journal of Consulting and Clinical Psychology. Vol. 46, No. 6, 1448-1462.

Gable, R.J. (1986). Social Competence, Coping Skills and Youth Crime: A Pragmatic and Theory-Based Approach. in: S.J. Apter & A.P. Goldstein (Eds). Youth Violence, program & prospects. New York: Pergamon Press.

Hindley, C.B. (1983). Psychological changes in adolescence related to physical changes. In: W. Everaerd, C.B. Hindley, A. Bot & J.J. van der Werff ten Bosch (Eds.) Development in adolescence. Boston: Martinus Nijhoff

Jagers, J.D. & B. Vlaar. (1984). Constructie van een follow up lijst psycho-sociale situatie "Probleem Jongeren". Amsterdam: Vrije Universiteit, Vakgroep ontwikkelings psychologie / Vakgroep Speciale Pedagogiek.

Jones, R.R., Weinrott, M.R., & J.R. Howard. (1981). The national evaluation of the Teaching Family Model. Eugene OR: Evaluation Research Group.

Junger-Tas,J., M. Junger, E. Barendse-Hoornweg & M.Sampiemon. (1983). Jeugddelinquentie, achtergronden en justitiële reactie. 's-Gravenhage: Staatsuitgeverij.

Kirigin, K.A., C.J. Braukmann, J. Atwater & M.M. Wolf. (1982). An evaluation of Teaching Family (Achievement Place) group homes for juvenile offenders. Journal of Applied Behavior Analysis. Vol. 15, No.1, 1-16.

Kirigin, K.A., M.M. Wolf, C.J. Braukmann, D.L. Fixsen & E.L. Phillips. (1979). Achievement Place: A preliminary outcome evaluation. in: J.S. Stumphauzer. (Eds.). Progress in behavior therapy with delinquents. Springfield, Illinois: Charles Thomas.

Le Blanc, M. & M. Fréchette (1989) Male Criminal Activity from Childhood Through Youth. New York, Berlin: Springer-Verlag.

Le Blanc, M., R. Loeber & G. Coté (1988). Temporal paths in delinquency: Stability, regression and progression analyzed with panel data from an adolescent and delinquent male sample. Journal of Quantative Criminology.

Loeber, R. (1988). Juvenile delinquency as a developmental process. Pittsburgh: Western Psychiatric Institute.

Loeber, R. & T.J. Dishion. (1987). Antisocial and Delinquent Youths: Methods for Their Early Indentification. in: J.D. Burchard & S. Burchard. (Eds.). Prevention of Delinquent Behavior. Newbury Park, Londen: Sage Publications.

McClannahan, L.E., P.J. Krantz, G.G. McGee & G.S. MacDuff. (1984). Teaching-Family Model for autistic children. in: U.P. Christian, G.T. Hannah & T.J. Glahn. (Eds.) Programming effective human services: Strategies for institutional change and client transition. New York: Plenum Press.

McFall, R.D. (1982). A Review and Reformulation of the Concept of Social Skills. Behavioral Assessment 4, 1-33.

McFall, R.M. & K.A. Dodge. (1982). Self-management and interpersonal sills learning. in: P. Karoly & F.H. Kanfer (Eds.). Selfmanagement and Behavior Change. New York: Pergamon Press.

Patterson, G.R. (1982). Coercive Family Process Eugene OR: Castalia

Phillips, E.L., E.A. Phillips, D.L. Fixsen & M.M. Wolf. (1972; 2nd. Ed. 1974). The Teaching Family Handbook. Lawrence, Kansas: University of Kansas, Dep. of Human Development.

Robins, L.N. (1986). The Consequences of Conduct Disorder in Girls. In: D. Olweus, J. Block & M. Radke-Yarrow (Eds). Development of Antisocial and Prosocial Behavior. New York: Academic Press.

Rutter, M. & H. Giller. (1983). Juvenile Delinquency.Trends and Perspectives. Harmondsworth: Pinguin Books.

Sherman, J.A., J.B. Sheldon, K. Morris, M. Strouse & R. M. Reese. (1984). A community-Based Residential Program for Mentally Retarded Adults: An Adaptation of the Teaching Family Model. in: C. Paine, G.T. Bellamy & B. Wilcox. (Eds.). Human services that work. Baltimore: Brookes.

Slot, N.W. (1988). Residentiële hulp voor jongeren met antisociaal gedrag. Lisse: Swets & Zeitlinger.

Slot, N. W. & A.A.J. Bartels (1983). Outpatient social skills training for youth in trouble. In: W. Everaerd, C.B. Hindley, A. Bot & J.J. van der Werff ten Bosch (Eds.) Development in adolescence. Boston: Martinus Nijhoff

Solnick, J.V., C.J. Braukmann, M.M. Bedlington, K.A. Kirigin & M.M. Wolf. (1981). Parent-youth interaction and delinquency in group homes. Journal of Abnormal Child Psychology. Vol. 9, 107-119.

Weinrott, M.R., R.R. Jones & J.R. Howard. (1982). Cost effectiveness of Teaching Family Programs for Delinquents, Results of a National Evaluation. Evaluation Review. Vol. 6, No. 2, 173-201.

Yule, W. & B.J. Brown (1987). Some Behavioral Applications with Juvenile Offenders outside North America. In: E.K. Morris & C.J. Braukmann (Eds.) Behavioral Approaches to Crime and Delinquency. New York: Plenum Press.

Table 1. Differences Between Pre-Treatment and Follow-Up Functioning by Kursushuis Boys (N=58)

	Pre-treatment		Follow-up		Difference			
Variable	M	SD	M	SD	t	df	p	+/-
*DOF 1)	3.99	.99	2.78	1.09	6.18	44	.000	+
*FOF 1)	3.71	.85	2.86	.79	3.41	20	.003	+
*RP 1)	4.10	1.12	2.80	1.06	4.10	19	.001	+
*OFF 1)	3.42	4.21	1.44	3.33	2.88	49	.006	+
*AVA 1)3)	5.09	1.27	4.60	1.91	1.80	57	.078	+
*SOC 1)2)	3.60	.79	2.83	.80	5.69	55	.000	+
*SPH 1)	1.45	.52	.90	.68	5.16	48	.000	+
#MREL 2)	.18	.97	1.44	2.19	-3.78	38	.001	+
*DRINK 3)	.65	.49	.93	.63	-2.75	30	.010	-
#MJOS 3)	2.96	2.43	3.33	2.56	- .85	51	.398	+

+/-: better/worse functioning at follow-up

*: a higher score relates to more difficulties

#: a higher score relates to less difficulties

1): variable is part of the factor "Problems"

2): variable is part of the factor "Abilities for relationships outside the family"

3): variable is part of the factor "Abilities for community participation".

Table 2: Breakdown of Pre-Treatment and Follow-up Offenses (N=50)

		FOLLOW-UP OFFENSES: none	1 or 2	>2	
PRE-TREATMENT OFFENSES	none	13	3*	1*	17 (34%)
	1 or 2	9#	4	1*	14 (28%)
	>2	11#	4#	4	19 (38%)
		33 (66%)	11 (22%)	6 (12%)	

*: Youths Progressing to a More Serious Stage of Offending

#: Youths Regressing to a Less Serious Stage of Offending

Table 3: Whereabouts of Former Kursushuis- and State Institute Residents During Follow-Up

	Kursushuis (%)	State Institute (%)
Living With Parent(s)	22.4	47.4
Living With Relatives	5.2	-
Living With Friend(s)	5.2	3.5
Foster Care	5.2	3.5
Sheltered Living	6.9	3.5
Living Independently	37.9	22.8
In Residential Treatment	13.8	12.3
Unknown	3.4	7.0

Table 4: Distribution of Parent Evaluation Scores in 4 Areas

	1	2	3	4	5	9 *
Social Climate:	14%	50%	28%	0%	0%	8%
Cooperation With TP's:	8%	39%	26%	10%	4%	13%
Youth Behavior:	7%	30%	29%	16%	7%	11%

	1	2	3	#
Program Clarity	55%	18%	26%	

*: 1=Very Positive; 2=Positive; 3=Neutral; 4=Negative; 5=Very Negative; 9=Unknown
#: 1=High; 2=Middle; 3=Low

Figure 1: Effects of the Kursushuis-Program and State Institute